

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SNT	68903	121599
O.I.P.E. CLASSIFIER	MTN	5a	12-21-99
FORMALITY REVIEW		71531	1-7-00
RESPONSE FORMALITY REVIEW		71531	3-20-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	10 5 8 4
	31 19 24 5
	02 03 03 04
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
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49	✓
50	✓

Claim	Date
Final Original	10 5 8 4
	31 19 24 5
	02 03 03 04
51	✓
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Claim	Date
Final Original	
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Best Available Copy

If more than 150 claims or 10 actions
 - staple additional sheet here

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